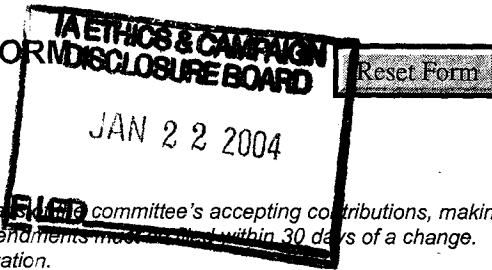


JR INSTRUCTIONS, SEE BACK OF FORM

CHECK ONE:

- ☒ This is an **initial*** Statement of Organization
 This is an **amended*** Statement of Organization

*An initial Statement of Organization must be filed within 10 days of the committee's accepting contributions, making expenditures, or incurring indebtedness exceeding \$750. Amendments must be filed within 30 days of a change. Penalties may be imposed for late-filed Statements of Organization.



Montgomery

| | |
|-----------------------------------|---------------------------------|
| FORM DR-1 (Rev. 07/2003) | STATEMENT OF ORGANIZATION |
| For Office Use Only | |
| Comm. # _____ | |
| Indexed _____ | |
| Audited _____ | |
| Computer _____ | |

COMMITTEE NAME

Committee to Re-elect Connie Magnesson County Auditor

IMPORTANT: Indicate type of committee you are reporting for:

(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee

COMMITTEE TREASURER (mandatory for all committees)

Name

Liz Schmid

Mailing Address

1503 Birchwood Drive

City, State Zip Code

Red Oak, IA 51566

Phone (712 623-3209)

e-Mail

COMMITTEE CHAIR (mandatory except for a candidate's committee)

Name

Mailing Address

City, State Zip Code

Phone ()

e-Mail

INDICATE PURPOSE OF COMMITTEE - Check One Box ☒ Advocate for/against candidate(s) ☐ Advocate for/against ballot issue(s)
 Comment or description:

All Candidates Enter:

Office Sought: County Auditor

District:

Political Party (if applicable) Republican

Year Standing for Election: 2004

County/Local Candidates and Local Ballot/Franchise Committees Enter:

County: Montgomery

Date of Election: June 8, 2004

Bank Account Name

Connie Magnesson Campaign Fund

Liz Schmid, Treasurer

Name of Financial Institution/type of Account

Houghton State Bank Checking

Mailing Address

116 E. Coolbaugh St.

City State Zip

Red Oak IA 51566

Candidate name & Address or Parent Entity (PACs, if applicable),

Connie Magnesson
 Affiliate, or Sponsor

Mailing Address

1103 E. Cherry St.

City State Zip

Red Oak IA 51566

Phone (712 623-9768)

e-Mail magnesson@heartland.net

STATEMENT OF AFFIRMATION: By filing this document the committee affirms the following:

- The committee and all persons connected with the committee understand that they are subject to the laws in Iowa Code chapters 68A and 68B and the administrative rules in Chapter 351 of the Iowa Administrative Code.
- That Iowa Code section 68A.6 and rule 351—4.9 require the filing of disclosure reports and that the failure to file these reports on or before the required due dates subjects the candidate or chairperson (in the case of committees other than a candidate's committee) to the automatic assessment of a civil penalty and the possible imposition of other criminal and civil sanctions.
- That Iowa Code section 68A.14 and rules 351—4.38 through 4.43 require the placement of the words "paid for by" and the name of the committee on all political materials except for those items exempted by statute or rule.
- That Iowa Code section 68A.15 and rules 351—4.44 through 4.52 prohibit the receipt of corporate contributions by all committees except for statewide and local ballot issue PACs.
- A candidate and a candidate's committee may only expend campaign funds as permitted by Iowa code sections 68A.40 through 68A.42 and rule 351—4.25.
- That the committee will continue to file disclosure reports until all activity has ceased, committee funds spent, debts resolved, and a final report and a statement of dissolution (DR-3) has been filed.

Elizabeth "Liz" Schmid
 Signature of Treasurer

Connie Magnesson
 Signature of Candidate, OR, for all other committees, Chairperson

Jan. 16, 2004
 Date Signed

Jan. 16, 2004
 Date Signed

FOR INSTRUCTIONS, SEE BACK OF FORM

CHECK ONE:

- This is an **initial*** Statement of Organization
☒ This is an **amended*** Statement of Organization

APR - 5 2004

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COMMITTEE NAME ↓ ↓

Committee to Re-Elect Connie Magnuson County Auditor

IMPORTANT: Indicate type of committee you are reporting for:

- (1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee

COMMITTEE TREASURER (mandatory for all committees)

Name ↓ ↓

Liz Schmid

Mailing Address ↓ ↓

1503 Birchwood Drive

City, State ↓ ↓ Zip Code ↓ ↓

Red Oak, IA 51566

Phone (712) 623-3209

e-Mail

COMMITTEE CHAIR (mandatory except for a candidate's committee)

Name ↓ ↓

Mailing Address ↓ ↓

City, State ↓ ↓ Zip Code ↓ ↓

Phone ()

e-Mail

INDICATE PURPOSE OF COMMITTEE - Check One Box ☒ Advocate for/against candidate(s) ☐ Advocate for/against ballot issue(s)
 Comment or description:

All Candidates Enter:

Office Sought: County Auditor

District:

Political Party (if applicable) Republican

Year Standing for Election: 2004

County/Local Candidates and Local Ballot/Franchise Committees Enter:

County: Montgomery

Date of Election: June 8, 2004

Bank Account Name

Committee to Re-Elect Connie Magnuson County Auditor

Liz Schmid, Treasurer

Name of Financial Institution/type of Account ↓ ↓

Houghton State Bank

Mailing Address ↓ ↓

116 E. Coolbaugh St.

City ↓ ↓ State ↓ ↓ Zip ↓ ↓

Red Oak IA 51566

Candidate name & Address or Parent Entity (PACs, if applicable),
Affiliate, or Sponsor

Connie Magnuson

Mailing Address ↓ ↓

1103 E. Cherry St.

City ↓ ↓ State ↓ ↓ Zip ↓ ↓

Red Oak, IA 51566

Phone (712) 623-9768

e-Mail magneson@heartland.net

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Signature of Treasurer

Date Signed

Signature of Candidate, OR, for all other committees, Chairperson

Date Signed